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| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| WESTERN DISTRICT OF PENNSYLVANIA | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: | Identify Yourself | | |
|-----|-----------------------|---|---|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exar | e the name that is on government-issued ure identification (for nple, your driver's use or passport). | Lisa First name Lorraine Middle name | First name Middle name |
| | iden | g your picture tification to your ting with the trustee. | Butler Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | de your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security aber or federal vidual Taxpayer tification number | xxx-xx-1811 | |

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Debtor 1 Lisa Lorraine Butler

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | Business name(s) |
| | | EINs | EINs |
| 5. | Where you live | 380 1/2 McClane Farm Road | If Debtor 2 lives at a different address: |
| | | Washington, PA 15301 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Washington | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Case number (if known) Debtor 1 Lisa Lorraine Butler

| •ar | t 2: Tell the Court About | our Ba | ankruptcy Ca | ase | | | | |
|------------|---|--|--------------|-------------------------------------|--|---|--|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> 1 fpage 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box. | | |
| | choosing to file under | Chapter 7 | | | | | | |
| | | ☐ Ch | napter 11 | | | | | |
| | | ☐ Ch | napter 12 | | | | | |
| | | ☐ Ch | napter 13 | | | | | |
| | | | | | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typ attorney is subr | pically, if you are paying the fee you | with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with | | |
| | | | | | n, sign and attach the Application for Individuals to Pay | | | |
| | | The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge r but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty lin | | | | | | |
| | | | | | | installments). If you choose this option, you must fill out ial Form 103B) and file it with your petition. | | |
|) . | Have you filed for | ■ No | | | | | | |
| | bankruptcy within the last 8 years? | ☐ Ye | S. | | | | | |
| | • | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | | | | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Ye | S. | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | - | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your | ■ No | . Go to | ine 12. | | | | |
| | residence? | ☐ Ye | s. Has yo | our landlord obta | ained an eviction judgment against | t you? | | |
| | | | | No. Go to line | 12. | | | |
| | | | | Yes. Fill out Int | | ludgment Against You (Form 101A) and file it as part of | | |

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| Debtor 1 | Lisa Lorraine Butler | Document | Case n | umber (if known) |
|----------|----------------------|----------|----------|----------------------|
| Jebioi i | Lisa Lorraine butier | | Case III | ullibel (II kriowii) |

| Par | t 3: Report About Any Bu | sinesses ` | You Own | as a Sole Proprie | tor | | | |
|--|---|----------------|---|--|---|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | ☐ Yes. Name and location of business | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | Name of business, if any | | | | |
| | If you have more than one sole proprietorship, use a | | Numb | er, Street, City, Sta | te & ZIP Code | | | |
| | separate sheet and attach it to this petition. | | Check | Check the appropriate box to describe your business: | | | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | | Stockbroker (as d | lefined in 11 U.S.C. § 101(53A)) | | | |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | | None of the above | e | | | |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, following in 11 U.S.C. 1116(1)(B). | | | a small business debtor, you must attach your most recent balance sheet, statement of | | | | | |
| | For a definition of small | ■ No. | I am n | ot filing under Chap | oter 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | □ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in a Code. | | | | | |
| | | ☐ Yes. | I am fi | ling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | |
| Par | t 4: Report if You Own or | Have Any | Hazardo | us Property or An | y Property That Needs Immediate Attention | | | |
| 14. | Do you own or have any | ■ No. | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and | ☐ Yes. | What is t | he hazard? | | | | |
| | public health or safety? Or do you own any | you own any ຸ້ | | iate attention is | | | | |
| | property that needs immediate attention? | | | why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | | | | |
| | - | | | | Number, Street, City, State & Zip Code | | | |
| | | | | | | | | |

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Debtor 1 Lisa Lorraine Butler

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | tor 1 Lisa Lorraine But | ler | | | Case numbe | (if known) |
|-----|--|------------------------|---|---|---|---|
| Par | t 6: Answer These Quest | ions for Re | porting Purposes | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily coindividual primarily for a pers | onsumer debts? Consonal, family, or house | sumer debts are defir hold purpose." | ned in 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | | Are your debts primarily be money for a business or inve | | | |
| | | | ☐ No. Go to line 16c. | | | |
| | | | ☐ Yes. Go to line 17. | | | |
| | | 16c. | State the type of debts you o | owe that are not consu | mer debts or busines | s debts |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter | 7. Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. I are paid that funds will be av | | | erty is excluded and administrative expenses |
| | administrative expenses | | ■ No | | | |
| | are paid that funds will be available for | | ☐ Yes | | | |
| | distribution to unsecured creditors? | | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 |) | 2 5,001-50,000 |
| | you estimate that you owe? | □ 50-99 | | ☐ 5001-10,00 | | ☐ 50,001-100,000 |
| | | ☐ 100-19 ☐ 200-99 | | ☐ 10,001-25,0 | 000 | ☐ More than100,000 |
| 19. | How much do you | \$ 0 - \$5 | 60,000 | □ \$1,000,001 | - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | | 1 - \$100,000 | \$10,000,00 | | \$1,000,000,001 - \$10 billion |
| | | | 01 - \$500,000 01 - \$1 million | | 1 - \$100 million 01 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| 20. | How much do you | \$0 - \$5 | 50,000 | □ \$1,000,001 | | □ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | | 01 - \$100,000 | □ \$10,000,00 □ \$50,000,00 | | □ \$1,000,000,001 - \$10 billion |
| | | _ | 01 - \$500,000 01 - \$1 million | | 1 - \$100 million 01 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| Par | t 7: Sign Below | | | | | |
| For | you | I have exa | amined this petition, and I dec | clare under penalty of | perjury that the inform | nation provided is true and correct. |
| | | | | | | under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7. |
| | | | ney represents me and I did in , I have obtained and read th | | | t an attorney to help me fill out this |
| | | I request i | relief in accordance with the o | chapter of title 11, Unit | ted States Code, spec | cified in this petition. |
| | | bankrupto and 3571. | y case can result in fines up | | | r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | Lisa Lor | raine Butler of Debtor 1 | | Signature of Debtor | · 2 |
| | | Executed | on May 15, 2019 | | Executed on | |
| | | | MM / DD / YYYY | | MM | / DD / YYYY |

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Debtor 1 Lisa Lorraine Butler Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David A | A Rice, Esq. | Date | May 15, 2019 | |
|-----------------|------------------------|---------------|----------------------|--|
| Signature of | Attorney for Debtor | | MM / DD / YYYY | |
| David A Di | ioo Eog | | | |
| David A Ri | ice, ⊑sq. | | | |
| Printed name | | | | |
| Rice & Ass | sociates Law Firm | | | |
| Firm name | | | | |
| 15 West B | eau Street | | | |
| Washingto | on, PA 15301 | | | |
| Number, Street, | City, State & ZIP Code | | | |
| Contact phone | 724-225-7270 | Email address | ricelaw1@verizon.net | |
| | | | | |
| 50329 PA | | | | |
| Bar number & St | tata | | | |

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| | | Docum | eni Paue 8 01 40 | |
|---------------------|--------------------------|--------------------|------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Lisa Lorraine But | tler | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT (| OF PENNSYLVANIA | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| | | | | · · |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as Value o | ssets f what you own |
|----|--|--------------------|-------------------------|
| | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 14,758.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 14,758.00 |
| ar | t 2: Summarize Your Liabilities | | |
| | | | abilities : you owe |
| | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 22,646.00 |
| | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 11,774.00 |
| | Your total liabilities | \$ | 34,420.00 |
| ar | t 3: Summarize Your Income and Expenses | | |
| | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,278.00 |
| | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,390.00 |
| ar | t 4: Answer These Questions for Administrative and Statistical Records | | |
| | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sch | edules. |
| | ■ Yes What kind of debt do you have? | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Debtor 1 Lisa Lorraine Butler

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,045.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total cla | im |
|--|-----------|------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| Debtor Debtor (Spouse, United | | nation to identify your cas | e and this filing: | | | |
|--|--|---|--|---|---|---|
| Debtor Spouse, United | 1 | | | | | |
| Spouse, Jnited | | Lisa Lorraine Butler | | | | |
| Spouse, Jnited | | First Name | Middle Name | Last Name | | |
| Jnited | | E. A.V. | ACT III AL | | | |
| | if filing) | First Name | Middle Name | Last Name | | |
| | States Ba | nkruptcy Court for the: WE | ESTERN DISTRICT OF PE | NNSYLVANIA | | |
| | umbor | | | | | |
| Jase n | umber _ | | | | | Check if this is ar amended filing |
| | | | | | | amended ming |
| | | | | | | |
| <u>Offic</u> | <u>ial Fo</u> | rm 106A/B | | | | |
| Sch | edul | e A/B: Propei | rtv | | | 12/15 |
| | | | | If an asset fits in more than o | ne category list the asset in | |
| format | ion. If more every ques | e space is needed, attach a se | eparate sheet to this form. On | ople are filing together, both a the top of any additional pag Own or Have an Interest In | | |
| Dovo | | sava any logal ar aquitable int | aract in any racidanae huildi | ng land or cimilar property? | | |
| DO AO | u own or r | nave any legal or equitable int | erest iii any residence, bulldi | ng, ianu, or similar property? | | |
| ■ No | . Go to Par | t 2. | | | | |
| ☐ Ye | s. Where is | s the property? | | | | |
| | 1 | | | | | |
| Part 2: | Describe | Your Vehicles | | | | |
| | e else driv | | llso report it on Schedule G | Executory Contracts and U | Inexpired Leases. | |
| omeon | e else driv | ves. If you lease a vehicle, a | llso report it on Schedule G | | | |
| Cars D No | e else driv s, vans, tro | ves. If you lease a vehicle, a | Ilso report it on Schedule G | | Do not deduct secured cl | |
| Cars No Ye | e else driv ; , vans, tru) es Make: | ves. If you lease a vehicle, a | Ilso report it on Schedule G | : Executory Contracts and U | Do not deduct secured cl | ed claims on Schedule D: |
| Cars No Ye | e else driv | ves. If you lease a vehicle, a ucks, tractors, sport utility Hyundai Elantra 2016 | who has an interest in Debtor 1 only | : Executory Contracts and U | Do not deduct secured clube amount of any secure Creditors Who Have Clair Current value of the | ed claims on Schedule D: ms Secured by Property. Current value of the |
| Cars No Ye | e else driv | ves. If you lease a vehicle, a ucks, tractors, sport utility Hyundai Elantra 2016 e mileage: 61,000 | Who has an interest in Debtor 1 only Debtor 1 and Debtor Debtor 1 and Debtor | : Executory Contracts and U the property? Check one 2 only | Do not deduct secured cl the amount of any secure Creditors Who Have Clai | ed claims on Schedule D: ms Secured by Property. |
| Cars No Ye | e else driv | res. If you lease a vehicle, a ucks, tractors, sport utility Hyundai Elantra 2016 e mileage: 61,000 nation: | who has an interest in Debtor 1 only | : Executory Contracts and U the property? Check one 2 only | Do not deduct secured clube amount of any secure Creditors Who Have Clair Current value of the | ed claims on Schedule D: ms Secured by Property. Current value of the |
| Cars No Ye | e else driv | ves. If you lease a vehicle, a ucks, tractors, sport utility Hyundai Elantra 2016 e mileage: 61,000 | Who has an interest in Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the d | the property? Check one 2 only ebtors and another | Do not deduct secured clube amount of any secure Creditors Who Have Clair Current value of the | ed claims on Schedule D: ms Secured by Property. Current value of the |
| Cars No Ye | e else driv | res. If you lease a vehicle, a ucks, tractors, sport utility Hyundai Elantra 2016 e mileage: 61,000 nation: | Who has an interest in Debtor 1 only Debtor 1 and Debtor Debtor 1 and Debtor | the property? Check one 2 only ebtors and another | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? |
| Cars No Ye | e else driv | res. If you lease a vehicle, a ucks, tractors, sport utility Hyundai Elantra 2016 e mileage: 61,000 nation: | Who has an interest in Debtor 1 only Debtor 2 only At least one of the d | the property? Check one 2 only ebtors and another | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? |
| Cars No State Stat | e else drivers, vans, trees Make: Model: Year: Approximate Other inform KBB privers | res. If you lease a vehicle, a ucks, tractors, sport utility Hyundai Elantra 2016 e mileage: 61,000 nation: | Who has an interest in Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the decision (see instructions) | the property? Check one 2 only ebtors and another | Do not deduct secured clean the amount of any secure Creditors Who Have Clair Current value of the entire property? \$9,969.00 | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$9,969.00 aims or exemptions. Put |
| Cars No 3.1 ! | e else drivers, vans, tropes Make: Model: Year: Xapproximat Other inform KBB privers Make: | Hyundai Elantra 2016 e mileage: 61,000 nation: rate party = \$9.969 | Who has an interest in Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the d Check if this is con (see instructions) Who has an interest in | the property? Check one 2 only ebtors and another nmunity property | Do not deduct secured class the amount of any secure Creditors Who Have Class Current value of the entire property? | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$9,969.00 aims or exemptions. Put d claims on Schedule D: |
| Cars No Ye 3.1 | e else drives, vans, trees Make: | res. If you lease a vehicle, a ucks, tractors, sport utility Hyundai Elantra 2016 e mileage: 61,000 nation: rate party = \$9.969 | Who has an interest in Debtor 1 only Debtor 1 and Debtor At least one of the d Check if this is con (see instructions) Who has an interest in Debtor 1 only | the property? Check one 2 only ebtors and another nmunity property | Do not deduct secured class the amount of any secure Creditors Who Have Class Current value of the entire property? \$9,969.00 Do not deduct secured class amount of any secure Creditors Who Have Class | current value of the portion you own? \$9,969.00 aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. |
| Cars No Ye 3.1 | e else drives, vans, trees Make: | Hyundai Elantra 2016 e mileage: 61,000 nation: rate party = \$9.969 Toyota Rav 4 | Who has an interest in Debtor 1 and Debtor Debtor 1 and Debtor At least one of the d Check if this is con (see instructions) Who has an interest in Debtor 1 only Debtor 2 only | the property? Check one 2 only ebtors and another nmunity property | Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property? \$9,969.00 | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$9,969.00 aims or exemptions. Put d claims on Schedule D: |
| Cars No Ye 3.1 | e else drivers, vans, trees Make: Model: Approximat Other inform KBB privers Make: Model: Year: Year: | Hyundai Elantra 2016 e mileage: 61,000 rate party = \$9.969 Toyota Rav 4 2016 e mileage: 20,000 | Who has an interest in Debtor 1 and Debtor Debtor 1 and Debtor At least one of the december of | the property? Check one 2 only ebtors and another nmunity property the property? Check one | Do not deduct secured classes the amount of any secure Creditors Who Have Clais Current value of the entire property? \$9,969.00 Do not deduct secured classes the amount of any secure Creditors Who Have Clais Current value of the | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$9,969.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the |
| . Cars □ Nd ■ Ye 3.1 ! () () () () () () () () () () () () () | e else drivers, vans, trues, vans, trues, vans, trues, vans, trues, vans, trues, vans, trues, vans, va | Hyundai Elantra 2016 e mileage: 61,000 nation: Toyota Rav 4 2016 e mileage: 20,000 nation: | Who has an interest in Debtor 1 and Debtor At least one of the decision of the | the property? Check one 2 only ebtors and another nmunity property the property? Check one | Do not deduct secured classes the amount of any secure Creditors Who Have Clais Current value of the entire property? \$9,969.00 Do not deduct secured classes the amount of any secure Creditors Who Have Clais Current value of the | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$9,969.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the |

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| 5 | Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here=> | \$11,308.00 |
|----|--|---|
| P | art 3: Describe Your Personal and Household Items | |
| | o you own or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe | |
| | living room set; bedroom set washer and dryer | \$1,750.00 |
| 7. | Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music of including cell phones, cameras, media players, games □ No ■ Yes. Describe | collections; electronic devices |
| | TV; stereo | \$1,500.00 |
| | Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin other collections, memorabilia, collectibles ■ No □ Yes. Describe Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments ■ No | |
| | ☐ Yes. Describe | |
| 10 | Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No □ Yes. Describe | |
| 11 | Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe | |
| | clothing | \$200.00 |
| 12 | Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gems, gems No Yes. Describe | gold, silver |
| 13 | Non-farm animals Examples: Dogs, cats, birds, horses No □ Yes. Describe | |
| 14 | Any other personal and household items you did not already list, including any health aids you did not list ■ No □ Yes. Give specific information | |

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Case number (if known) Debtor 1 **Lisa Lorraine Butler** 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,450.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No ☐ Yes..... Institution name: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

☐ Yes. Give specific information about them...

page 3

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Lisa Lorraine Butler Case number (if known)

| 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No No: No: No: No: No: No: No: | | | | | |
|--|-----|----------------------------------|---|--|-------------------------|
| Yes. Give specific information about them Clurenses, franchises, and other general intangibles | 26. | | | | |
| | | | | | |
| Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No | | ☐ Yes. Give spe | cific information about them | | |
| Money or property owed to you? Current value of the portion you own? No Yes. Give specific information about them, including whether you already filed the returns and the tax years Pamily support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid vages, disability, or life insurance else No Yes. Give specific information Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name. Beneficiary: Surrender or refund value: 2. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 3. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 4. One contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim | | Examples: Build | | on holdings, liquor licenses, professional license | es |
| Portion you own? No | | ☐ Yes. Give spe | cific information about them | | |
| Do not deduct secured claims or exemptions. Tax refunds owed to you | Mc | oney or property | owed to you? | | Current value of the |
| No | | | | | Do not deduct secured |
| 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes, Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes, Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim Any financial assets you did not already list No Yes. Give specific information | | _ | ed to you | | |
| Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 44. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information | | ☐ Yes. Give spec | cific information about them, including whether you alr | eady filed the returns and the tax years | |
| 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 8. Any financial assets you did not already list No Yes. Give specific information | | Examples: Past | | port, maintenance, divorce settlement, property | settlement |
| Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 1. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 2. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 3. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | | ☐ Yes. Give spec | cific information | | |
| Yes. Give specific information. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information | 30. | Examples: Unpa | aid wages, disability insurance payments, disability be | nefits, sick pay, vacation pay, workers' compen | sation, Social Security |
| Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 44. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim | | | ecific information | | |
| Surrender or refund value: Surrender or refund value: Beneficiary: Surrender or refund value: | | Examples: Healt | | (HSA); credit, homeowner's, or renter's insuran | ce |
| Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information | | | | | |
| If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information | | | | Beneficiary: | |
| Yes. Give specific information. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment <i>Examples</i>: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached | 32. | If you are the be someone has di | eneficiary of a living trust, expect proceeds from a life i | | ive property because |
| Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | | | cific information | | |
| Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached | | Examples: Accid | | | |
| No ☐ Yes. Describe each claim 35. Any financial assets you did not already list ☐ No ☐ Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached | | | each claim | | |
| 35. Any financial assets you did not already list ■ No □ Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached | | _ | nt and unliquidated claims of every nature, includi | ng counterclaims of the debtor and rights to | set off claims |
| ■ No □ Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached | | ☐ Yes. Describe | each claim | | |
| ☐ Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached | | - | ssets you did not already list | | |
| | | | ecific information | | |
| | 36 | | | | \$0.00 |

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Debtor 1

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Case number (if known) Debtor 1 Lisa Lorraine Butler

| 37. C | Oo you own or have any legal or equitable interest in any business-related | d property? | | |
|--------------|--|------------------------|------------------------------|-------------|
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| Part | 6: Describe Any Farm- and Commercial Fishing-Related Property You of If you own or have an interest in farmland, list it in Part 1. | Own or Have an Interes | st In. | |
| 46. l | Do you own or have any legal or equitable interest in any farm- o | or commercial fishir | ng-related property? | |
| | No. Go to Part 7. | | | |
| | ☐ Yes. Go to line 47. | | | |
| Part | 7: Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| • | Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write tha | t number here | | \$0.00 |
| Part | 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$11,308.00 | - | |
| 57. | Part 3: Total personal and household items, line 15 | \$3,450.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$0.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$14,758.00 | Copy personal property total | \$14,758.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$14,758.00 |

63. Total of all property on Schedule A/B. Add line 55 + line 62

Schedule A/B: Property

Official Form 106A/B

page 5

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| | | Docume | ent Page 15 of 46 | |
|------------------------|--------------------------|--------------------|-------------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Lisa Lorraine But | tler | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT (| OF PENNSYLVANIA | |
| Case number (if known) | | | | ☐ Check if this is an |
| Official Fo | orm 106C | | | amended filing |

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| You are claiming federal exemptions. 11 | U.S.C. § 522(D)(2) | | | |
|--|--------------------------------------|-------|---|------------------------------------|
| For any property you list on Schedule A/E | Sthat you claim as exe | empt, | fill in the information below. | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| 2016 Toyota Rav 4 20,000 miles leased auto | \$1,339.00 | | \$0.00 | 11 U.S.C. § 522(d)(5) |
| value = remaining lease balance Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| living room set; bedroom set washer and dryer | \$1,750.00 | | \$1,750.00 | 11 U.S.C. § 522(d)(3) |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| TV; stereo Line from Schedule A/B: 7.1 | \$1,500.00 | | \$642.00 | 11 U.S.C. § 522(d)(3) |
| Line IIoiii Schedule A.B. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| clothing Line from Schedule A/B: 11.1 | \$200.00 | | \$200.00 | 11 U.S.C. § 522(d)(3) |
| Line nom Soriedule Arb. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |

Official Form 106C

No

Yes

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor 1 Lisa Lorraine Butler Case number (if known)

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| | | Document | Page 17 | 7 of 46 | | |
|---|----------------------------|--|-----------------|-------------------------------------|------------------------|--------------------|
| Fill in this infor | mation to identify you | ur case: | | | | |
| Debtor 1 | Lisa Lorraine B | utler | | | | |
| | First Name | Middle Name | Last Name | | - | |
| Debtor 2 | First Name | Middle Name | Last Name | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | inkruptcy Court for the | : WESTERN DISTRICT OF PER | NSYLVANIA | | | |
| Case number _ (if known) | | | | | _ | k if this is an |
| | | | | | amei | nded filing |
| Official Forr | n 106D | | | | | |
| | | | _ | | | |
| schedule | D: Creditors | Who Have Claims | Secure | d by Propert | <u>у</u> | 12/15 |
| | e Additional Page, fill it | If two married people are filing togeth out, number the entries, and attach it | | | | |
| , | have claims secured b | y your property? | | | | |
| ☐ No. Chec | k this box and submit t | his form to the court with your other | r schedules. Y | ou have nothing else t | o report on this form. | |
| | n all of the information | • | | | | |
| | | below. | | | | |
| | II Secured Claims | | | Column A | Column B | Column C |
| | | more than one secured claim, list the cre s a particular claim, list the other creditor | | / Amount of claim | Value of collateral | Unsecured |
| | | ical order according to the creditor's nan | | Do not deduct the | that supports this | portion |
| 2.1 Bridgecre | est | Describe the property that secures | the claim: | value of collateral. \$20,449.00 | claim \$9,969.00 | If any \$10,480.00 |
| Creditor's Nam | | 2016 Hyundai Elantra 61,00 | | 420,110100 | Ψο,σσοίσο | |
| Attn: Ban | • | KBB private party = \$9.969 | | | | |
| 7300 E F1 | ampton Ave, Ste | As of the date you file, the claim is: | Check all that | | | |
| Mesa, AZ | 85209 | apply. Contingent | | | | |
| | t, City, State & Zip Code | ☐ Unliquidated | | | | |
| , | , . , , , , | ☐ Disputed | | | | |
| Who owes the de | ebt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | | ☐ An agreement you made (such as | mortgage or sec | cured | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and D | ebtor 2 only | ☐ Statutory lien (such as tax lien, me | echanic's lien) | | | |
| | the debtors and another | ☐ Judgment lien from a lawsuit | , | | | |
| ☐ Check if this c community de | laim relates to a | Other (including a right to offset) | Purchase I | Money Security | | |
| | Opened 04/19 Last | | | | | |

0701

Last 4 digits of account number

Active

Date debt was incurred 4/19/19

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| Debtor 1 Lisa Lorra | aine Butler | | Case number | (if known) | | |
|--|---|--|---------------|-------------|------------|--------|
| First Name | Middle N | lame Last Name | | | | |
| 2.2 Timepayment | Corp, LLC. | Describe the property that secures the cla | im: \$8 | 58.00 | \$1,500.00 | \$0.00 |
| Creditor's Name | | TV; stereo | | | | |
| Attn: Bankrup 1600 District A Burlington, M. | Ave, Ste 200 A 01803 | As of the date you file, the claim is: Check a apply. Contingent Unliquidated | II that | | | |
| Who owes the debt? | Sheck one | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| _ | Slieck offe. | ☐ An agreement you made (such as mortga | go or cocured | | | |
| Debtor 1 only | | car loan) | ge or secured | | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 | 2 only | ☐ Statutory lien (such as tax lien, mechanic's | a lion) | | | |
| ☐ At least one of the del | • | ☐ Judgment lien from a lawsuit | s lien) | | | |
| Check if this claim re community debt | | - · · · · · · · · · · · · · · · · · · · | to-own | | | |
| Date debt was incurred | Opened 09/16 Last Active 6/07/17 | Last 4 digits of account number | 7647 | | | |
| 2.3 Toyota Financ | cial | Describe the property that secures the cla | im: \$1,3 | 39.00 | \$1,339.00 | \$0.00 |
| Atty: Bankrup Po Box 8026 Cedar Rapids | | 2016 Toyota Rav 4 20,000 miles leased auto value = remaining lease balance As of the date you file, the claim is: Check a apply. ☐ Contingent | II that | | | |
| Number, Street, City, S | | ☐ Unliquidated | | | | |
| Who owes the debt? | | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | | ☐ An agreement you made (such as mortga car loan) | ge or secured | | | |
| ☐ Debtor 1 and Debtor 2 | 2 only | ☐ Statutory lien (such as tax lien, mechanic's | s lien) | | | |
| At least one of the del | otors and another | ☐ Judgment lien from a lawsuit | | | | |
| Check if this claim re community debt | elates to a | Other (including a right to offset) | Lease | | | |
| Date debt was incurred | Opened 06/16 Last Active 4/26/19 | Last 4 digits of account number | R764 | | | |
| | | | | | | |
| Add the dollar value o | of your entries in C | Column A on this page. Write that number he | re: | \$22,646.00 | | |
| If this is the last page | | the dollar value totals from all pages. | | \$22,646.00 | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | | Document | Page 1 | 9 of 46 | _ | |
|--|--|---|---|--|---|--|
| Fill in this inf | ormation to identify your o | case: | | | | |
| Debtor 1 | Lisa Lorraine Butl | er | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | WESTERN DISTRICT OF PE | NNSYLVANIA | <u> </u> | | |
| Case number | | | | | | |
| (if known) | - | | | | ПС | heck if this is an |
| | | | | | ar | mended filing |
| | | | | | _ | - |
| | orm 106E/F | | | | | |
| Schedule | E/F: Creditors W | ho Have Unsecured | l Claims | | | 12/15 |
| any executory o Schedule G: Ex Schedule D: Cre left. Attach the (| contracts or unexpired leases to ecutory Contracts and Unexpi editors Who Have Claims Secu | e Part 1 for creditors with PRIORI that could result in a claim. Also red Leases (Official Form 106G). Ired by Property. If more space is e. If you have no information to re | list executory of Do not include needed, copy | contracts on Schedule A/B any creditors with partially the Part you need, fill it ou | : Property (Officia y secured claims it, number the ent | al Form 106A/B) and on that are listed in ries in the boxes on the |
| Part 1: Lis | t All of Your PRIORITY Una | secured Claims | | | | |
| 1. Do any cre | ditors have priority unsecured | d claims against you? | | | | |
| No. Go | to Part 2. | | | | | |
| ☐ Yes. | | | | | | |
| Part 2: Lis | t All of Your NONPRIORIT | Y Unsecured Claims | | | | |
| _ ` | ditors have nonpriority unsec | | | | | |
| ☐ No. You | i have nothing to report in this pa | art. Submit this form to the court with | n your other sche | edules. | | |
| Yes. | | | | | | |
| unsecured | claim, list the creditor separately | nims in the alphabetical order of t for each claim. For each claim liste st the other creditors in Part 3.If you | d, identify what t | type of claim it is. Do not list | claims already incl | luded in Part 1. If more |
| | | | | | | Total claim |
| 4.1 Anth | ony Zenner | Last 4 digits of ac | count number | 2019 | | \$4,876.00 |
| | ority Creditor's Name | | | | | <u> </u> |
| | ilmont Drive | When was the deb | ot incurred? | | | |
| | hington, PA 15301 er Street City State Zip Code | As of the date you | file, the claim | is: Check all that apply | | |
| | ncurred the debt? Check one. | · | , | , | | |
| ■ De | btor 1 only | ☐ Contingent | | | | |
| _ | btor 2 only | ☐ Unliquidated | | | | |
| _ | btor 1 and Debtor 2 only | ☐ Disputed | | | | |
| _ | least one of the debtors and ano | - (110115516 | RITY unsecured | d claim: | | |
| | eck if this claim is for a comm | | | | | |
| debt | CON III GOIGHII IS IOI & COIIIII | ☐ Obligations arisi | ing out of a sepa | aration agreement or divorce | that you did not | |
| Is the | claim subject to offset? | report as priority cla | nims | 3 | • | |
| ■ No | | ☐ Debts to pensio | n or profit-sharin | ng plans, and other similar de | ebts | |
| п., | | • 011 0 11 | money judg | gment for rent owing | I | |
| ☐ Yes | S | Other. Specify | no order of | possession | | |

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Case number (if known)

| Cavalry Portfolio Services / Springleaf | Last 4 digits of account number | 6703 | \$2,038.00 |
|---|--|--|------------|
| Nonpriority Creditor's Name Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595 | When was the debt incurred? | Opened 06/15 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| lebt s the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ⊒ Yes | personal lo household Other. Specify judgment e | an used to pay bills and buy goods entered | |
| Collection Service / Wash Family Med Nonpriority Creditor's Name | Last 4 digits of account number | X73Q | \$154.00 |
| Attn: Bankruptcy Po Box 560 New Kensington, PA 15068 | When was the debt incurred? | Opened 10/16 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt s the claim subject to offset? — | report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | • • | |
| Yes | Other. Specify medical set | vices provided | |
| Collection Service / Wash Family Med | Last 4 digits of account number | X71G | \$128.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 560 | When was the debt incurred? | Opened 10/16 Last Active 3/13/18 | |
| New Kensington, PA 15068 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| ls the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | ■ Other. Specify medical set | vices provided | |

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| Luckee Network Systems | Look A dimito of account number 1100 | ¢500.00 |
|---|---|------------|
| Hughes Network Systems Nonpriority Creditor's Name 26000 Canyon oad | Last 4 digits of account number | \$500.00 |
| Bedford, OH 44146 | | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify internet services | |
| Jefferson Capital Systems / | | |
| Fingerhut Nonpriority Creditor's Name | Last 4 digits of account number 4003 | \$2,244.00 |
| Po Box 1999 | When was the debt incurred? Opened 10/18 | |
| Saint Cloud, MN 56302 | Ореней 10/10 | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | revolving credit used to buy household goods | |
| Progressive Leasing / Big Lots | Last 4 digits of account number 7386 | \$1,723.00 |
| Nonpriority Creditor's Name | | ÷ -,- = |
| 256 West Data Drive | When was the debt incurred? | |
| Draper, UT 84020 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | 3. and you mo, the dam to oneon all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ Student loans | |
| ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | _ revolving credit used to buy household | |

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| Debtor 1 | Lisa Lorra | aine Butler | | Case no | umber (if known) | | |
|---------------------------|-------------------------------|--|--|--------------|---|------------------|-------------------|
| | | Sys Inc / MedExpress | Last 4 digits of account number | 8410 | | | \$111.00 |
| At | npriority Cred tn: Bankr | uptcy | When was the debt incurred? | Oper | ned 06/14 | | |
| | Box 156 | - | | | | | |
| Wi | ilmington | i, DE 15618 | As of the data way file the plains | ! O | H.d. of L | | |
| | | City State Zip Code the debt? Check one. | As of the date you file, the claim | is: Check | call that apply | | |
| _ | | | _ | | | | |
| | Debtor 1 onl | ly | ☐ Contingent | | | | |
| | Debtor 2 onl | ly | ☐ Unliquidated | | | | |
| | Debtor 1 and | d Debtor 2 only | ☐ Disputed | | | | |
| | At least one | of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | Check if thi | s claim is for a community | ☐ Student loans | | | | |
| del | | , | ☐ Obligations arising out of a sep | aration ag | reement or divorce that you | did not | |
| ls t | the claim su | bject to offset? | report as priority claims | | • | | |
| | No | | ☐ Debts to pension or profit-shari | ng plans, | and other similar debts | | |
| | Yes | | ■ Other. Specify medical se | vices p | provided | | |
| | | | | | | | |
| | | | ebt That You Already Listed | | | | |
| is trying to have more | o collect fro e than one c | m you for a debt you owe to s | about your bankruptcy, for a debt that omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add or submit this page. | n Parts 1 | or 2, then list the collection | n agency here. S | Similarly, if you |
| Name and A | Address | | On which entry in Part 1 or Part 2 did you | ı list the o | riginal creditor? | | |
| Anthony | Zenner | | Line 4.1 of (Check one): | Part 1: | Creditors with Priority Unsec | ured Claims | |
| | | lackwell, Esq. | | Part 2: | Creditors with Nonpriority Un | secured Claims | |
| | | et, Suite 321 | | | | | |
| Washing | ton, PA 1 | 5301 | Last 4 digits of account number | 14 | 419 | | |
| Name and A | Address | | On which entry in Part 1 or Part 2 did you | ı list the o | riginal creditor? | | |
| Cavalry S | | | | | Creditors with Priority Unsec | ured Claims | |
| c/o David | | ker, Esq. | | | Creditors with Nonpriority Un | | |
| 520 Fello | wship Ro | oad, C306 | _ | - 1 alt 2. | Creditors with Nonphonty On | Secured Claims | |
| Mount La | aurel, NJ (| 08054 | | | | | |
| | | | Last 4 digits of account number | 47 | 207 | | |
| Part 4: | Add the A | mounts for Each Type of U | nsecured Claim | | | | |
| | | | nims. This information is for statistical | reporting | purposes only. 28 U.S.C. § | 159. Add the ar | nounts for each |
| | nsecured cla | • • | | | , | , | |
| | | | | | Total Claim | | |
| | 6a. | Domestic support obligation | s | 6a. | \$ | 0.00 | |
| Tota | | | | | | | |
| claims from Part 1 | - | Taxes and certain other deb | ts you owe the government | 6b. | \$ | 0.00 | |
| | 6c. | | injury while you were intoxicated | 6c. | \$ | 0.00 | |
| | 6d. | ·- | secured claims. Write that amount here. | 6d. | \$ | 0.00 | |
| | | , , | | | | | |
| | 6e. | Total Priority. Add lines 6a th | rough 6d | 6e. | \$ | 0.00 | |
| | 00. | Total Thomas Talances on the | rough ou. | 00. | 4 | 0.00 | |
| | | | | | Total Claim | | |
| | 6f. | Student loans | | 6f. | \$ | 0.00 | |
| Tota | | - | | | Ť | | |
| claims | | | | | | | |
| from Part 2 | 2 6g. | Obligations arising out of a you did not report as priority | separation agreement or divorce that | 6g. | \$ | 0.00 | |
| | 6h. | | naring plans, and other similar debts | 6h. | \$ | 0.00 | |
| | 6i. | • | y unsecured claims. Write that amount | 6i. | 11. | 774.00 | |
| | | here. | | | \$ | | |
| | 0' | Total Naments 24 A LLP C | of the according C: | 0. | Φ | | |
| | 6j. | Total Nonpriority. Add lines 6 | it through 61. | 6j. | \$ 11. | 774.00 | |

11,774.00

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| | | | 111 1 11111. 20 01 40 | |
|---------------------|--------------------------|--------------------|-----------------------|--|
| Fill in this info | rmation to identify your | case: | | |
| Debtor 1 | Lisa Lorraine But | tler | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | WESTERN DISTRICT O | OF PENNSYLVANIA | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit Name, Numb | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|---------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | - | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | , | | 3. | | |

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| | | Docume | ent Page 24 o | f 46 |
|----------------------------|--|---|------------------------------|---|
| Fill in thi | s information to identify your | case: | | |
| Debtor 1 | Lisa Lorraine Bu | tler | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, fi | ing) First Name | Middle Name | Last Name | |
| | 3, | | | |
| United St | ates Bankruptcy Court for the: | WESTERN DISTRICT | OF PENNSYLVANIA | |
| Case nun | nber | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Officia | al Form 106H | | | |
| | | lobtors | | 40/45 |
| Scried | dule H: Your Cod | enrois | | 12/15 |
| fill it out, a | | boxes on the left. Attact). Answer every question | h the Additional Page to | on. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write as a codebtor. |
| | | | | |
| ■ No | | | | |
| ш үе | S | | | |
| | thin the last 8 years, have yo na, California, Idaho, Louisiana | | | 1? (Community property states and territories include ngton, and Wisconsin.) |
| ■ No | . Go to line 3. | | | |
| ☐ Ye | s. Did your spouse, former spo | use, or legal equivalent liv | e with you at the time? | |
| | | | | |
| in lin Form | e 2 again as a codebtor only | if that person is a guarar | ntor or cosigner. Make s | if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 6G). Use Schedule D, Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and 2 | IP Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.1 | | | | ☐ Schedule D, line |
| 0 | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | Number Street | | | _ |
| | City | State | ZIP Code | |
| | | | | Doublet D. Kee |
| 3.2 | Name | | | Schedule D, line |
| | | | | ☐ Schedule E/F, line |
| | Number Street | | | _ |

State

City

ZIP Code

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| SII | in this information to | identify your co | 200 | | | | İ | | | | |
|---------------------------------|---|-----------------------------------|---|---|-----------------------|----------------|----------------------|--------------------------|---------------------------|----------------------------------|-----------------|
| | otor 1 | Lisa Lorrain | | | | | | | | | |
| | otor 2 ouse, if filing) | | | | | _ | | | | | |
| Uni | ted States Bankrupt | cy Court for the | : WESTERN DISTRICT | OF PENNSYLVANIA | ١ | _ | | | | | |
| | se number | | | | | | □ A | | d filing ent showing | g postpetition ollowing date: | |
| <u>O</u> 1 | fficial Form | <u> 1061</u> | | | | | N | 1M / DD/ Y | YYY | | |
| S | chedule I: \ | Your Inco | ome | | | | | | | | 12/15 |
| sup spo atta | plying correct infor use. If you are sepa ch a separate shee | rmation. If you arated and you | sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition | ng jointly, and your s th you, do not includ | spouse i de inforr | s liv natio | ing with on about | you, inclu t your spo | ude inform ouse. If mo | nation about ore space is | your needed, |
| 1. | Fill in your emploinformation. | yment | | Debtor 1 | | Debtor 2 | or non-fil | ling spouse | | | |
| | If you have more than one job, attach a separate page with information about additional | | Employment status | ■ Employed | | | | ☐ Emplo | oyed | | |
| | | Employment status | ☐ Not employed | | | | ☐ Not er | mployed | | | |
| | employers. | | Occupation | CNA | | | | | | | |
| | Include part-time, self-employed wor | | Employer's name | Advanced Surgi | cal Hos | spita | al | | | | |
| | Occupation may in or homemaker, if it | | Employer's address | Trich Drive Suite 1 Washington, PA | 15301 | | | | | | |
| | | | How long employed ti | here? 11 mon | ths | | | | | | |
| Par | t 2: Give Deta | ails About Mon | | | | | | _ | | | |
| Esti i spou | mate monthly inco use unless you are s u or your non-filing s | me as of the da eparated. | ate you file this form. If you | , c | • | | | | | · | J |
| more | e space, attach a se | parate sheet to | this form. | | | | | | | | |
| | | | | | | | For Del | btor 1 | | otor 2 or ng spouse | |
| 2. | | | ry, and commissions (be calculate what the monthl | | 2. | \$ | 2 | ,045.00 | \$ | N/A | |
| 3. | Estimate and list | monthly overti | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross I | ncome. Add lir | ne 2 + line 3. | | 4. | \$ | 2,04 | 45.00 | \$ | N/A | |

Official Form 106I Schedule I: Your Income page 1

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| Deb | tor 1 | Lisa Lorraine Butler | - | (| Case i | number (<i>if kr</i> | nown) | | | | |
|-----|---------------|--|----------------|------------|-------------|-----------------------|--------------|----------|---------------------|-------------------|--------------------|
| | C = | urling A horse | 4 | | | Debtor 1 | | non | Debtor -filing s | pouse | |
| | Cop | ly line 4 here | 4. | | \$_ | 2,045 | 0.00 | \$ | | N/A | <u> </u> |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | | \$ | 335 | 5.00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b | | \$ | | 0.00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c | | \$ | | 0.00 | \$ | | N/A | |
| | 5d. | Required repayments of retirement fund loans Insurance | 5d | | \$ | | 0.00 | \$_ | | N/A | |
| | 5e. 5f. | Domestic support obligations | 5e 5f. | | \$ | | 0.00 | \$ \$ | | N/A | |
| | 5g. | Union dues | 5g | | \$ — | | 0.00 | \$- | | N/A | |
| | 5h. | Other deductions. Specify: | - | + | <u>*</u> — | | | + \$ | | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | | 5.00 | \$ | | N/A | _ |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 1,480 | | \$ | | N/A | \ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | ı . | \$ | (| 0.00 | \$ | | N/A | A |
| | 8b. | Interest and dividends | 8b | ١. | \$ | | 0.00 | \$ | | N/A | |
| | 8c. 8d. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation | 8c 8d | | \$ \$ | |).00).00 | \$ | | N/A | |
| | 8e. | Social Security | 8e | | \$ — | | 3.00 | \$ | | N/A | |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | e 8f. 8g | | \$ \$ | (| 0.00 | \$ \$ | | N/A | <u> </u> |
| | 8h. | Other monthly income. Specify: | _ | ı.+ | \$ | | 0.00 | | | N/A | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | 9 | S | | 3.00 | \$ | | N/ | _ |
| 10. | Calo | culate monthly income. Add line 7 + line 9. | 10. | \$ | • | 2,278.00 | + \$ | | N/A | = \$ | 2,278.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | *- | | _,_, | - - | | 14// | * - | 2,270.00 |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depe | | - | | | | | <i>J</i> . +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | | | 12. | \$ | 2,278.00 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | | | Comb | ined nly income |
| | | No. | | | | | | | | | |
| | | Voc Exploin: | | | | | | | | | , |

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| | in this informa | ation to identify yo | our case: | | | | | |
|---------------------|--|---|--|---|--|--------------|-------------------|-------------------------------|
| | tor 1 | Lisa Lorraine | | | | Chec | k if this is: | |
| DCD | 101 1 | LISA LOTTAIN | e buller | | | | An amended filing | |
| | tor 2 | | | | | | | ving postpetition chapter |
| (Spc | ouse, if filing) | | | | | | 13 expenses as of | the following date: |
| Unite | ed States Bankı | ruptcy Court for the | : WESTE | ERN DISTRICT OF PENN | SYLVANIA | - | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| Of | fficial Fo | orm 106J | | | | | | |
| Sc | chedule | J: Your | Exper | nses | | | | 12/15 |
| Be a info nun | as complete ormation. If m nber (if know | and accurate as nore space is ne n). Answer ever | s possible eded, atta ry questio | . If two married people a ch another sheet to this | | | | |
| 1. | t 1: Desci Is this a joir | ribe Your House nt case? | enoia | | | | | |
| | ■ No. Go to | line 2. | in a senar | ate household? | | | | |
| | □ 100. D0 0 | | iii a sepai | ate mousemola. | | | | |
| | | - | st file Offic | al Form 106J-2, <i>Expenses</i> | s for Separate House | hold of Debt | tor 2. | |
| 2. | Do you hav | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | Brother | | 63 years | Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| _ | D | | | | | | | ☐ Yes |
| 3. | expenses o | penses include of people other the d your depende | han $_{\square}$ | No Yes | | | | |
| exp | imate your ex | | our bankr | ly Expenses uptcy filing date unless y y is filed. If this is a sup | | | | |
| the | value of suc | h assistance an | | government assistance is luded it on Schedule I: | | | Your exp | enses |
| (Oii | ficial Form 10 | ю., | | | | | Tour oxp | |
| 4. | | or home owners | | ses for your residence. I or lot. | Include first mortgage | 4. \$ | | 675.00 |
| | If not include | ded in line 4: | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. \$ | | 0.00 |
| | 4b. Prope | rty, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 0.00 |
| | | | | upkeep expenses | | 4c. \$ | | 20.00 |
| _ | | owner's associat | | | | 4d. \$ | | 0.00 |
| 5. | Additional r | mortgage payme | ents for vo | our residence , such as ho | me equity loans | 5. \$ | | 0.00 |

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| Debtor 1 | Lisa Lorraine Butler | Case numl | per (if known) | |
|--------------|---|---------------|----------------|-------------------------|
| S. Util | ities: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 200.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 75.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 190.00 |
| 6d. | Other. Specify: | 6d. | • | 0.00 |
| | od and housekeeping supplies | 7. | \$ | |
| | ldcare and children's education costs | | · | 600.00 |
| _ | | 8. | \$ | 0.00 |
| | thing, laundry, and dry cleaning | 9. | \$ | 100.00 |
| | sonal care products and services | 10. | \$ | 50.00 |
| | dical and dental expenses | 11. | \$ | 200.00 |
| | nsportation. Include gas, maintenance, bus or train fare. | 12. | ¢ | 200.00 |
| | not include car payments. | | · | |
| | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 40.00 |
| | aritable contributions and religious donations | 14. | \$ | 100.00 |
| | urance. | | | |
| | not include insurance deducted from your pay or included in lines 4 or 20. | 150 | c | 0.00 |
| | . Life insurance | 15a. | • | 0.00 |
| | . Health insurance | 15b. | · | 0.00 |
| | . Vehicle insurance | 15c. | · | 400.00 |
| | . Other insurance. Specify: | 15d. | \$ | 0.00 |
| | es. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| Spe | cify: | 16. | \$ | 0.00 |
| | allment or lease payments: | | | |
| 17a | . Car payments for Vehicle 1 | 17a. | \$ | 540.00 |
| 17b | . Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c | . Other. Specify: | 17c. | \$ | 0.00 |
| 17d | . Other. Specify: | 17d. | \$ | 0.00 |
| . You | ir payments of alimony, maintenance, and support that you did not report a | ıs | | |
| | lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I) | | \$ | 0.00 |
| | er payments you make to support others who do not live with you. | | \$ | 0.00 |
| Spe | cify: | 19. | | |
| . Oth | er real property expenses not included in lines 4 or 5 of this form or on Sci | hedule I: Yo | ur Income. | |
| | . Mortgages on other property | 20a. | | 0.00 |
| 20b | . Real estate taxes | 20b. | \$ | 0.00 |
| 20c | . Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | . Maintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| | . Homeowner's association or condominium dues | 20e. | | 0.00 |
| | | | · | |
| . Otn | er: Specify: | 21. | +\$ | 0.00 |
| . Cal | culate your monthly expenses | | | |
| | . Add lines 4 through 21. | | \$ | 3,390.00 |
| | . Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | | | · | 2 200 00 |
| 220 | . Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,390.00 |
| . Cal | culate your monthly net income. | | | |
| | . Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,278.00 |
| | Copy your monthly expenses from line 22c above. | 23b. | · | 3,390.00 |
| 200 | . Supply san morning expenses from the 220 above. | 200. | <u> </u> | 3,390.00 |
| 230 | . Subtract your monthly expenses from your monthly income. | | | |
| 200 | The result is your <i>monthly net income</i> . | 23c. | \$ | -1,112.00 |
| | | | | |
| 4. Do | you expect an increase or decrease in your expenses within the year after | you file this | form? | |
| For | example, do you expect to finish paying for your car loan within the year or do you expect yo | | | e or decrease because c |
| | ification to the terms of your mortgage? | | | |
| | No. | | | |
| □ ` | | | | |
| | 100. 1=75.0 | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|---------------------------------|--|---------------------------|-----------------------------|-----------------------|--|
| Debtor 1 | Lisa Lorraine But | - | | | |
| Dahtar 0 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT O | F PENNSYLVANIA | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| Official Forr | | | | | |
| Declarat | tion About a | ın Individual | Debtor's Sci | nedules | 12/15 |
| | i8 U.S.C. §§ 152, 1341, 1 | , | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attorn | ney to help you fill out ba | nkruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. I | Name of person | | | | ptcy Petition Preparer's Notice, nd Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sumn | nary and schedules filed | with this declaration | and |
| X /s/ Lisa | a Lorraine Butler | | X | | |
| Lisa L | orraine Butler ure of Debtor 1 | | Signature of D | Debtor 2 | |
| Date | May 15, 2019 | | Date | | |

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| | in this inform | ation to identify you | | | | | | | | | | |
|---------------------|----------------------------|--|--|---|--|---|--|--|--|--|--|--|
| | | nation to identify you | _ | | | | | | | | | |
| Del | otor 1 | Lisa Lorraine Bu | utler Middle Name | Last Name | | | | | | | | |
| | otor 2 ouse if, filing) | First Name | Middle Name | Last Name | | | | | | | | |
| Uni | ted States Ban | kruptcy Court for the: | WESTERN DISTRICT O | F PENNSYLVANIA | | | | | | | | |
| | se number | | | | - | Check if this is an mended filing | | | | | | |
| Sta Be a info | as complete a | of Financial and accurate as possore space is needed, | ible. If two married people a | | equally responsible for sup y additional pages, write you | | | | | | | |
| | <u> </u> |). Answer every que etails About Your Ma | stion. arital Status and Where You | u Lived Before | | | | | | | | |
| 1. | | current marital statu | | | | | | | | | | |
| | ☐ Married ■ Not marr | ried | | | | | | | | | | |
| 2. | During the la | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | | |
| | ■ No □ Yes. List | ■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | Idress: | Dates Debtor 2 lived there | | | | | | |
| 3. state | | | | | ity property state or territory | | | | | | | |
| | ■ No □ Yes. Mal | ke sure you fill out <i>Scl</i> | hedule H: Your Codebtors (O | fficial Form 106H). | | | | | | | | |
| Par | t 2 Explain | n the Sources of You | r Income | | | | | | | | | |
| 4. | Fill in the total | l amount of income yo | u received from all jobs and | ng a business during this yeall businesses, including part re together, list it only once ur | | ndar years? | | | | | | |
| | □ No ■ Yes. Fill | in the details. | | | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$9,810.00 | ☐ Wages, commissions, bonuses, tips | | | | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | | | |

Official Form 107

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Case number (if known) Document

Debtor 1 Lisa Lorraine Butler

| | | | | Debtor 1 | | Debtor 2 | |
|----|---|---|---|--|--|---|---|
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | endar year: o December | 31, 2018) | ■ Wages, commissions, bonuses, tips | \$10,600.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | | ☐ Operating a business | | ☐ Operating a business | |
| | | ndar year be o December | | ■ Wages, commissions, bonuses, tips | \$33,000.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | | ☐ Operating a business | | ☐ Operating a business | |
| 5. | Include in and othe winnings List each | ncome regard r public bene . If you are fil | dless of wheth fit payments; ling a joint cas the gross inco | ner that income is taxable. Ex pensions; rental income; inte se and you have income that | o previous calendar years? amples of other income are a rest; dividends; money collec you received together, list it of ately. Do not include income the | ted from lawsuits; royalties; a only once under Debtor 1. | Security, unemployment, nd gambling and lottery |
| | | | | Debtor 1 | | Debtor 2 | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | | ry 1 of curre I filed for ba | nt year until nkruptcy: | Social Security Benefits | Social Security \$3,990.00 | | |
| | | endar year: o December | 31, 2018) | Unemployment | \$9,600.00 | | |
| | | | | Social Security Benefits | \$9,576.00 | | |
| | | ndar year be o December | | Social Security Benefits | \$9,576.00 | | |
| | | | | estate settlement | \$2,000.00 | | |
| P | art 3: Lis | st Certain Pe | avments Vou | Made Before You Filed for | Bankruptev | | |
| | LI | o. oc. talli i c | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | made Bereie Tou Filed for | -a.maptoj | | |
| 6. | Are eithe ☐ No. | Neither D | ebtor 1 nor D | 's debts primarily consume Debtor 2 has primarily conso personal, family, or househo | umer debts. Consumer debt | s are defined in 11 U.S.C. § 1 | 01(8) as "incurred by an |
| | | During the | 90 dave hefo | are you filed for bankruptoy d | id you pay any creditor a tota | I of \$6.825* or more? | |
| | | | Go to line 7 | | ia you pay arry orealior a lola | 1 οι ψο,υ2ο οι ιποι σ : | |
| | | □ Yes | List below e | each creditor to whom you pa | id a total of \$6,825* or more into | | |
| | | * Subject | not include | payments to an attorney for t | | ••• | • |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known) Debtor 1 Lisa Lorraine Butler Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... still owe paid **Bridgecrest** monthly \$540.00 \$20,449.00 ☐ Mortgage Attn: Bankruptcy Car 7300 E Hampton Ave, Ste 100 ☐ Credit Card Mesa, AZ 85209 ☐ Loan Repayment ☐ Suppliers or vendors □ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment Include creditor's name still owe paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number ☐ Pending Zenner v Butler landlord tennant LT-14-19 1929-A Route 519 South ☐ On appeal Canonsburg, PA 15317 ☐ Concluded money judgment issued Cavalry SPV v Butler **Wash Co Common Pleas** civil □ Pending 2016-4207 Washington, PA 15301 ☐ On appeal ☐ Concluded judgment entered

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| De | btor 1 | Lisa Lorraine Butler | Boodinone | Case number (| if known) | |
|-----|----------|--|--------------------------|----------------------------------|------------------------|------------------------|
| 40 | NACCOL . | | • | | | 1 1 1 10 |
| 10. | | in 1 year before you filed for bankruptcy it all that apply and fill in the details below. | | perty repossessed, foreclosed | , garnished, attached | i, seized, or levied? |
| | | N. O. I. II. | | | | |
| | _ | No. Go to line 11. Yes. Fill in the information below. | | | | |
| | | ditor Name and Address | Describe the Property | • | Date | Value of the |
| | | | Explain what happene | ed | | property |
| 11 | Withi | in 90 days before you filed for bankrupt | | | titution set off any a | mounts from your |
| | | unts or refuse to make a payment becau | | oldding a bank of infanolai ino | indical, set on any c | iniounis nom you |
| | | No | | | | |
| | | Yes. Fill in the details. ditor Name and Address | Describe the action th | e creditor took | Date action was | Amoun |
| | Orec | uitor Name and Address | Describe the action to | ie creditor took | taken | Alliouli |
| 12. | | in 1 year before you filed for bankruptcy | | perty in the possession of an a | ssignee for the bene | efit of creditors, a |
| | court | t-appointed receiver, a custodian, or and | other official? | | | |
| | | No | | | | |
| | | Yes | | | | |
| Pa | rt 5: | List Certain Gifts and Contributions | | | | |
| 13. | Withi | in 2 years before you filed for bankrupto | cy, did you give any gif | ts with a total value of more th | an \$600 per person | ? |
| | _ | No | | | | |
| | | Yes. Fill in the details for each gift. s with a total value of more than \$600 | Describe the gifts | • | Dates you gave | Value |
| | | person | Describe the girt | 5 | the gifts | value |
| | Pers | son to Whom You Gave the Gift and | | | | |
| | Add | ress: | | | | |
| 14. | Withi | in 2 years before you filed for bankrupto | cy, did you give any gif | ts or contributions with a tota | l value of more than | \$600 to any charity? |
| | _ | No | ihutian | | | |
| | | Yes. Fill in the details for each gift or contri s or contributions to charities that total | | u contributed | Dates you | Value |
| | more | e than \$600 | Describe what ye | o contributed | contributed | Value |
| | | rity's Name ress (Number, Street, City, State and ZIP Code) | | | | |
| Pa | rt 6: | List Certain Losses | | | | |
| | | | | hamboontan distress to a co | hima haaassa afii | 4 flue adher iller (|
| 15. | withi | in 1 year before you filed for bankruptcy | or since you filed for | pankruptcy, did you lose anyt | ning because of thef | t, fire, otner disaste |

or gambling?

No

☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost Case 19-21979-CMB Doc 1 Filed 05/15/19 Entered 05/15/19 13:56:03 Desc Main Document Page 34 of 46 Case number (if known)

Debtor 1 Lisa Lorraine Butler

| Part 7: | List Certain | Payments | or | Transfers |
|---------|--------------|-----------------|----|------------------|
|---------|--------------|-----------------|----|------------------|

| 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | rty to anyone you | |
|--|--|---|---|---------------|--|---|
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and v transferred | alue of any proper | ty | Date payment or transfer was made | Amount of payment |
| | Rice & Associates Law Firm 15 West Beau Street Washington, PA 15301 ricelaw1@verizon.net | Attorney Fees | | | 5/13/19 | \$400.00 |
| 17. | Within 1 year before you filed for bankruptcy, dipromised to help you deal with your creditors on Do not include any payment or transfer that you list No Yes. Fill in the details. | r to make payments | | | r transfer any prope | rty to anyone who |
| | Person Who Was Paid Address | Description and v transferred | Description and value of any property transferred | | Date payment or transfer was made | Amount of payment |
| Ιδ. | Within 2 years before you filed for bankruptcy, of transferred in the ordinary course of your busin include both outright transfers and transfers made a include gifts and transfers that you have already list. No Yes. Fill in the details. | ness or financial affa as security (such as t | iirs? he granting of a sec | | | |
| | Person Who Received Transfer Address Person's relationship to you | | | | ny property or received or debts change | Date transfer was made |
| 19. | Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details. | | y property to a self | f-settled tru | st or similar device | of which you are a |
| | Name of trust | Description and value of the property transferred | | | ed | Date Transfer was made |
| Par | t 8: List of Certain Financial Accounts, Instru | ments, Safe Deposit | Boxes, and Storag | ge Units | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | |
| | | st 4 digits of count number | Type of account of instrument | clos | e account was sed, sold, ved, or nsferred | Last balance before closing or transfer |
| | | | | | | |

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Debtor 1 Lisa Lorraine Butler

| 21. | Do you now have, or did you have within 1 year cash, or other valuables? | ar before you filed for bankruptcy, an | y safe deposit box or other deposite | ory for securities, |
|-----|--|---|--------------------------------------|-----------------------|
| | No | | | |
| | Yes. Fill in the details. | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit or | place other than your home within 1 | year before you filed for bankruptcy | ? |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
| Par | 19: Identify Property You Hold or Control fo | r Someone Else | | |
| 23. | Do you hold or control any property that some for someone. | eone else owns? Include any propert | y you borrowed from, are storing fo | r, or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value |
| Par | t 10: Give Details About Environmental Inform | nation | | |
| For | the purpose of Part 10, the following definition | s apply: | | |
| | Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s | air, land, soil, surface water, ground | - · | |
| | Site means any location, facility, or property a to own, operate, or utilize it, including disposa | • | aw, whether you now own, operate, | or utilize it or used |
| | Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or | | waste, hazardous substance, toxic | substance, |
| Rep | ort all notices, releases, and proceedings that | you know about, regardless of when | they occurred. | |
| 24. | Has any governmental unit notified you that you | ou may be liable or potentially liable | under or in violation of an environm | ental law? |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 25. | Have you notified any governmental unit of an | y release of hazardous material? | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of site | Governmental unit | Environmental law, if you | Date of notice |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State and | know it | |

Case number (if known) Debtor 1 Lisa Lorraine Butler 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Lisa Lorraine Butler Lisa Lorraine Butler Signature of Debtor 2 Signature of Debtor 1 Date May 15, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person ___ . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Doc 1

Document

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| Debtor 1 | Lisa Lorraine But | | | |
|------------------------------------|---|----------------------|---|---|
| Dobtor 1 | First Name | Middle Name | Last Name | - |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | - |
| United States Ba | nkruptcy Court for the: | WESTERN DISTR | ICT OF PENNSYLVANIA | |
| | | | | - |
| Case number | | | | ☐ Check if this is an amended filing |
| | | | | |
| Official Fo | rm 108 | | | |
| Statemer | nt of Intentio | n for Indiv | iduals Filing Under Cha | pter 7 12/15 |
| | | | | |
| | vidual filing under chap | | out this form if: | |
| _ | e claims secured by you ed personal property a | | nt expired | |
| You must file this | s form with the court w | thin 30 days after | you file your bankruptcy petition or by the da | |
| whiche on the f | · · · · · · · · · · · · · · · · · · · | e court extends the | e time for cause. You must also send copies | to the creditors and lessors you list |
| If two married pe | ople are filing together | in a joint case, bot | h are equally responsible for supplying corr | ect information. Both debtors must |
| | d date the form. | , | | |
| | and accurate as possible our name and case num | | needed, attach a separate sheet to this form | . On the top of any additional pages, |
| Part 1: List Yo | our Creditors Who Have | Secured Claims | | |
| 1. For any credito | ors that you listed in Pa | | Creditors Who Have Claims Secured by Pro | perty (Official Form 106D), fill in the |
| information be Identify the cre | elow. editor and the property th | at is collateral | What do you intend to do with the property | |
| | | | secures a debt? | as exempt on Schedule C? |
| | | | | |
| Creditor's B name: | ridgecrest | | ☐ Surrender the property. | □ No |
| name. | | | ☐ Retain the property and redeem it. ☐ Retain the property and enter into a | ■ Yes |
| Description of | 2016 Hyundai Elan miles | tra 61,000 | Reaffirmation Agreement. | |
| property securing debt: | KBB private party | = \$9.969 | Retain the property and [explain]: retain & pay | |
| | | | - Column or party | |
| Creditor's T i | imepayment Corp, L | C. | ☐ Surrender the property. | □ No |
| name: | mopaymont corp, E | -0. | ☐ Retain the property and redeem it. | L No |
| Description of | TV; stereo | | ☐ Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property | , 5.5.55 | | Retain the property and [explain]: | |
| securing debt: | | | retain & pay | |
| Creditor's T o | oyota Financial Serv | ices | ■ Surrender the property. | □ No |
| name: | | | ☐ Retain the property and redeem it. | |
| Description of | 2016 Toyota Rav 4 | 20 000 miles | ☐ Retain the property and enter into a | Yes |
| property | leased auto | | Reaffirmation Agreement. Retain the property and [explain]: | |
| | value = remaining | ease balance | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 | Lisa Lorraine Butler | Case number (if known) | |
|----------------------------|--|--|---------------------------------|
| securing | g debt: | | = |
| | List Your Unexpired Personal Property Leas | | |
| in the infor | mation below. Do not list real estate leases | sted in Schedule G: Executory Contracts and Unexpired at Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2) | lease period has not yet ended. |
| Describe y | your unexpired personal property leases | | Will the lease be assumed? |
| Lessor's na Description | | | □ No |
| Property: | | | ☐ Yes |
| Lessor's na | | | □ No |
| Property: | To housed | | ☐ Yes |
| Lessor's na | | | □ No |
| Property: | Torreased | | ☐ Yes |
| Lessor's na | | | □ No |
| Property: | i oi leaseu | | ☐ Yes |
| Lessor's na | | | □ No |
| Description Property: | i oi leased | | ☐ Yes |
| Lessor's na | | | □ No |
| Description Property: | i oi leaseu | | ☐ Yes |
| Lessor's na | | | □ No |
| Description Property: | i oi leased | | ☐ Yes |
| Part 3: | Sign Below | | |
| Under pena | alty of perjury, I declare that I have indicated at its subject to an unexpired lease. | d my intention about any property of my estate that sec | cures a debt and any personal |
| | sa Lorraine Butler | X | |
| | Lorraine Butler ture of Debtor 1 | Signature of Debtor 2 | |
| Date | May 15, 2019 | Date | |

| Fill in this info | ormation to identify your case: | | | | | irected in this form and | in Form |
|---|--|--|--|-----------------------|--------------------|---|-----------------------------------|
| Debtor 1 | Lisa Lorraine Butler | | | 2A-1Su _l | op: | | |
| Debtor 2 (Spouse, if filing) | | | | ■ 1. Th | nere is no pres | umption of abuse | |
| United States | Bankruptcy Court for the: Western District of | of Pennsylvania | ' | a | pplies will be m | o determine if a presur nade under <i>Chapter 7</i> | |
| Case number (if known) | · | | | □ 3. Th | ne Means Test | cial Form 122A-2). does not apply now be service but it could as | |
| | | | | | | n amended filing | pry later. |
| Official I | Form 122A - 1 | | | | | 3 | |
| | 7 Statement of Your Cu | rrent Moi | nthly Inc | ome |) | | 12/1 |
| attach a separa case number (i qualifying milit | e and accurate as possible. If two married people te sheet to this form. Include the line number to a f known). If you believe that you are exempted fro ary service, complete and file <i>Statement of Exem</i> Calculate Your Current Monthly Income | which the addition om a presumption | nal information a of abuse becau | applies. se you d | On the top of ar | ny additional pages, wri narily consumer debts o | te your name and or because of |
| 1. What is | your marital and filing status? Check one o | nly. | | | | | |
| ■ Not r | married. Fill out Column A, lines 2-11. | | | | | | |
| ☐ Marr | ied and your spouse is filing with you. Fill o | ut both Columns | A and B, lines | 2-11. | | | |
| ☐ Marr | ied and your spouse is NOT filing with you. | You and your s | spouse are: | | | | |
| □Li | ving in the same household and are not leg | ally separated. | Fill out both Co | lumns A | and B, lines 2 | 2-11. | |
| рe | ving separately or are legally separated. Fill enalty of perjury that you and your spouse are ving apart for reasons that do not include evadi | legally separated | d under nonban | kruptcy | law that applie | es or that you and you | |
| 101(10A). For the 6 months | verage monthly income that you received from all or example, if you are filing on September 15, the 6-rs, add the income for all 6 months and divide the tota on the same rental property, put the income from that | nonth period would I by 6. Fill in the re | be March 1 throus bult. Do not include | ugh Augu de any in | ust 31. If the amo | ount of your monthly incompre than once. For examp | ne varied during ble, if both |
| <u> </u> | | | | Colum Debto | | Column B Debtor 2 or non-filing spouse | |
| | oss wages, salary, tips, bonuses, overtime, deductions). | and commission | ons (before all | \$ | 2,045.00 | \$ | |
| 3. Alimony | y and maintenance payments. Do not include B is filled in. | e payments from | a spouse if | \$ | 0.00 | \$ | |
| of you of from an and room | unts from any source which are regularly por your dependents, including child support unmarried partner, members of your househol mmates. Include regular contributions from a spont include payments you listed on line 3. | t. Include regular d, your depende | contributions nts, parents, | \$ | 0.00 | \$ | |
| | ome from operating a business, profession. | or farm | | * | | · | |
| | 3 , , | | otor 1 | | | | |
| Gross re | eceipts (before all deductions) | \$0.00 | | | | | |
| Ordinary | and necessary operating expenses | -\$0.00 | | | | | |
| Net mor | athly income from a business, profession, or fail | rm \$ 0.00 | Copy here -> | \$ | 0.00 | \$ | |
| 6. Net inco | ome from rental and other real property | 5 · | ton 4 | | | | |
| | | | otor 1 | | | | |
| | eceipts (before all deductions) | \$ 0.00 -\$ 0.00 | | | | | |
| • | and necessary operating expenses | · | Copy here -> | \$ | 0.00 | \$ | |
| | nthly income from rental or other real property | \$ | Copy liele -> | | 0.00 | \$ | |
| 7. Interest | , dividends, and royalties | | | \$ | 0.00 | * | |

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Debtor 1 Lisa Lorraine Butler

Case number (if known)

Column A Debtor 1 Column B Debtor 2 or

| | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing sp | oouse | |
|-----|---|---|----------|-------------------|-----------------------|------------------------------------|----------|----------------|
| 8. | Unemployment compensation | | | \$ | 0.00 | \$ | | |
| | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here: For you \$ | | | | | | | |
| | For your spouse \$ | | | | | | | |
| 9. | Pension or retirement income. Do not include any ambenefit under the Social Security Act. | nount received that was | s a | \$ | 0.00 | \$ | | |
| 10. | Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below. | Security Act or payment manity, or international | ts or | \$ | 0.00 | \$ | | |
| | • | | | Φ | 0.00 | Φ | | |
| | Total amounts from separate pages, if any. | | | φ | 0.00 | \$ | | |
| | rotai amounts from separate pages, il any. | | | Ф | 0.00 | D | | |
| 11. | Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to | | \$ | 2,045.00 | + 5 | | = \$ | 2,045.00 |
| | | | | | | | Total c | urrent monthly |
| art | 2: Determine Whether the Means Test Applies t | o You | | | | | | |
| 40 | Coloulate wave assessed was at his imposes for the support | Callany than a store | | | | | | |
| 12. | Calculate your current monthly income for the year | | | | | | | |
| | 12a. Copy your total current monthly income from line 1 | 11 | | Сору | line 11 h | ere=> | \$ | 2,045.00 |
| | Multiply by 12 (the number of months in a year) | | | | | | x 1 | |
| | 12b. The result is your annual income for this part of the | e form | | | | 12b. | \$ | 24,540.00 |
| 13. | Calculate the median family income that applies to | you. Follow these step | s: | | | | | |
| | Fill in the state in which you live. | PA | | | | | | |
| | Fill in the number of people in your household. | 2 | | | | | | |
| | Fill in the median family income for your state and size | of household. | | | | 13. | \$ | 66,649.00 |
| | To find a list of applicable median income amounts, go for this form. This list may also be available at the bank | | ecified | in the separa | te instructi | ons | | |
| 14. | How do the lines compare? | | | | | | | |
| | 14a. Line 12b is less than or equal to line 13. O Go to Part 3. | n the top of page 1, che | eck box | 1, There is n | o presum _i | otion of abuse | | |
| | 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | of page 1, check box 2, | The pr | esumption of | abuse is d | letermined by | Form 12 | 2A-2. |
| art | 3: Sign Below | | | | | | | |
| | By signing here, I declare under penalty of perjury | that the information on | this sta | atement and i | n any atta | chments is tru | e and co | orrect. |
| | χ /s/ Lisa Lorraine Butler | | | | | | | |
| | Lisa Lorraine Butler Signature of Debtor 1 | | | | | | | |
| | Date May 15, 2019 | | | | | | | |
| | MM / DD / YYYY If you checked line 14a, do NOT fill out or file Forn | n 122A-2 | | | | | | |
| | If you checked line 14b, fill out Form 122A-2 and f | | | | | | | |
| | ii you oneokeu iine 140, iiii out Foiiii 122A-2 aliu l | iic it with this lotti. | | | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-21979-CMB Doc 1 Filed 05/15/19 Entered 05/15/19 13:56:03 Desc Main Document Page 45 of 46

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

| In re | Lisa Lorraine Butler | • | Case N | 0. | |
|-------|---|---|---------------------------|-----------------------|--------------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COM | PENSATION OF ATTOR | NEY FOR I | DEBTOR(S) | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contempla | e filing of the petition in bankruptcy, o | r agreed to be pa | aid to me, for servic | |
| | For legal services, I have agreed to accept | | . \$ | 1,600.00 | |
| | Prior to the filing of this statement I have rece | ived | \$ | 400.00 | |
| | Balance Due | | . \$ | 1,200.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed | compensation with any other person ur | nless they are me | embers and associat | es of my law firm. |
| | ☐ I have agreed to share the above-disclosed comcopy of the agreement, together with a list of the | | | | my law firm. A |
| 5. | In return for the above-disclosed fee, I have agreed | to render legal service for all aspects of | of the bankruptc | y case, including: | |
| | a. Analysis of the debtor's financial situation, andb. Preparation and filing of any petition, schedulesc. Representation of the debtor at the meeting of cd. [Other provisions as needed] | s, statement of affairs and plan which n | nay be required; | - | bankruptcy; |
| | Negotiations with secured creditors reaffirmation agreements and applications of the secured creditors are secured creditors. | cations as needed; preparation a | | | |
| 5. | By agreement with the debtor(s), the above-disclose Representation of the debtors in an any other adversary proceeding. | ed fee does not include the following s y dischargeability actions, judici | ervice: al lien avoida | nces, relief from | stay actions or |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement cankruptcy proceeding. | of any agreement or arrangement for p | ayment to me fo | or representation of | the debtor(s) in |
| N | lay 15, 2019 | /s/ David A Rice, Es | | | |
| L | Oate (| David A Rice, Esq. Signature of Attorney | | | |
| | | Rice & Associates | | | |
| | | 15 West Beau Stree Washington, PA 15 | | | |
| | | 724-225-7270 Fax: | 724-225-7318 | 3 | |
| | | <u>ricelaw1@verizon.</u> Name of law firm | net | | |

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United States Bankruptcy Court Western District of Pennsylvania

| | | Lisa Lorraine Butler | | | | | |
|--|----------------------------------|--------------------------|----------|---|--|--|--|
| Date: | May 15, 2019 | /s/ Lisa Lorraine Butler | | | | | |
| The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge. | | | | | | | |
| VERIFICATION OF CREDITOR MATRIX | | | | | | | |
| | | Debtor(s) | Chapter | 7 | | | |
| In re | Lisa Lorraine Butler | | Case No. | | | | |
| | Western District of Pennsylvania | | | | | | |

Signature of Debtor